## L19000304043

(Re	questor's Name)	
(Add	dress)	
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PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

TO: Registration Section Division of Corporations	₩
School System Solutions LLC SUBJECT:	
Name of L	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matte	er to the following:
Raquei Santos	
Name of Person	_ <del></del> .
School System Solutions LLC	
Firm/Company	<del></del>
475 NE 91st St	
Address	
Miami Shores, FL 33138	
City/State and Zip Code	
admin@schoolsystemsolutions.com; gabriela2311gaby@g	mail.com
E-mail address: (to be used for future annual rep	ort notification)
for further information concerning this matter, please	call:
Raquel Santos at (	305 4799647
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amoun	nt:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2. (a)	475 NE 91st St Miami Shores, FL 33138	(b) 475 NES	91st St Miami Shores FL 33138
·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12/13/2019	 L1900030-	1043
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	UNITED STATES CORPORATION AGENTS, INC.		
	Registered Agent and Registered Office shown on the records of the 5575 S. SEMORAN BLVD, SUITE 36 ORLANDO, FL 32	•	7020 C
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	2020 DEC 14 SECRETALLASS
(b)		<del></del>	AT: 19
()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u> RAQUEL B SANTOS	Office address:	
	NEW Registered Office Address:		
	475 NE 91st St		_
	Miami Shores, FL	33138	_
change agent v was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable.	egistered office ar pility company, it i the limited liabili	nd the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in impany.
Signat	nire of a member or authorized representant out a member		Printed or typed name of signee
I herel	ov accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pa igations of my position as registered agent as provided Tyreflect a change in the registered office address. The	ertonnonce of me	duties, and Lam familiar with and accent